# RECEIVED CENTRAL FAX CENTER

NOV 1 6 2006

# **FACSIMILE COVER SHEET**

The Law Offices of

#### **STRAUB & POKOTYLO**

620 Tinton Avenue Bldg. B, 2<sup>nd</sup> Floor Tinton Falls, NJ 07724-3260

Telephone: 732-542-9070 Facsimile: 732-542-9071 Internet site: www.sp-ip.com

To: <u>U.S.</u> 1	Patent and Trademark Office
Facsimile 1	No.: (571) 273-8300
Telephone 1	No.:
From: Micl	nael P. Straub, Esq.
Date: Nove	ember 16, 2006
Number of D	Pages Including Cover: $32$
Attorney Dock Appl. No.: 09 Applicant: Re Filed: August	ajiv LAROIA, Junyi LI : 16, 2001 :OMMUNICATIONS METHODS AND APPARATUS
Examiner: <b>St</b> e	even H. D. Nguyen
	CERTIFICATE OF FACSIMILE TRANSMISSION
is being facs	by certify that this paper (and any accompanying paper(s)) simile transmitted to the United States Patents and Fice on the date shown below.
Michael P. Str	aub
Type or print	name of person signing certification
Muhael	16 Thank November 16, 2006
Signature	Date

### RECEIVED CENTRAL FAX CENTER

### NOV 1 6 2006

Modified PTQ/SB/17 (01-03)

Approved for use through 04/30/2003. OMB 0651-0639

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known FEE TRANSMITTAL Application Number 09/931,469 Filing Date August 16, 2001 for FY 2006 Rajiv LaRoia First Named Inventor Effective 12/08/2004. Patent fees are subject to annual revision. **Examiner Name** Steven H. D. Nguyen Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (5) 610.00				Attorney Docket No.			0.	Flarion-21 (Q060542)		
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)						
Check Credit card Order Other None				3. ADDITIONAL FEES Large Entity   Small Entity						
Deposit Account:  Deposit Account 50-1049			Fee Code 1051	(\$)	Fee Code 2051		Sura	Fee Description	Fee Paid	
Number Deposit Account Name	Straub & Pokotylo			. 50	2052	25	Surc	tharge - late provisional filing fee or ar sheet		
The Commissioner is authorized to: (check all that apply) 図Charge any fee(s) indicated below 図 Credit any overpayments 図Charge any additional fee(s) due in connection with the filing			1	130 2,520	1053 1812	130 2.520		-English specification filing a request for ex parte reexamination	on	
⊠Charge any additional fee(s) due in connection with the filing submitted herewith □Charge fee(s) indicated below, except for the filing fee in the			1804	920*	1804	920.	Ехэ	uesting publication of SIR prior to miner action		
to the above-identified deposit account.				1,840*		1.840*	Exa	juesting publication of SIR after miner action		
FEE CALCULATION			1251		2251	60		ension for reply within first month		
1. BASIC FILING, SEARCH & EXAMINATION FEES			1252		2252			ension for reply within second month		
Large Entity		C D-:-		1,020	2253	510	Exte	ension for reply within third month	610.00	
Fee (\$)	Fee Fee Description (\$)	Fee Paid	1254	1,590	2254	795	Exte	ension for reply within fourth month		
1000	500 Utility fee		1255	2,160	2255	1,080	Exte	ension for reply within fifth month		
430	215 Design fee	<u> </u>	1401	500	240	250	Not	ice of Appeal		
660	330 Plant fee		1402	500	2402	2 250	Filir	ng a brief in support of an appeal		
1400	700 Reissue fee		1403	1.000	2403	500		uest for oral hearing		
200	100 Provisional fee		1451	1,510	1451	1,510	Pet	ilion to institute a public use proceeding		
SUBTOTAL (1) (S) 00.00				500	2452	250	Pet	ition to revive - unavoidable		
	1453	1,500	2453	. 750	Pet	ition to revive - unintentional				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE				1,400	2501	700	Util	ity issue fee (or reissue)		
	Extra Claims	Fee from below Fee Paid	1502		2502	400	De	sign issue fee		
Total Claims	20** = X	=	1503	1,100	2503	550	Pla	ant issue fee		
Independent - 3** = X ==					1		Petiti	ons to the Commissioner - check fee she	et	
Muttiple Depe	ndent	=	1807	50	1807	50	Pro	ocessing fee under 37 CFR 1.17(c)		
Large Entity			1806	180	1806	180	Su	bmission of Information Disclosure Stm		
Fee Fee Code (\$)	Fee Fee <u>Fee Descrip</u> Code (\$) 2202 25 Claims in excess 6		8021	40	8021	40		cording each patent assignment per perty (times number of properties)		
1202 50 1201 200	2201 100 Independent clair		1809	790	2809	395		ing a submission after final rejection CFR 1.129(a))		
1203 360		nt claim, if not paid	1810	790	2,810	395		r each additional invention to be amined (37 CFR 1.129(b))		
1204 200	2204 100 **Reissue independ over original pater		1801	790	2801	395		quest for Continued Examination (RCE	)	
1205 50	2205 25 **Reissue claims and over origin	in excess of 20	1802	900	1802	900		quest for expedited examination a design application		
	Other fee (specify)									
SUBTOTAL (2) (\$) "or number previously paid, if greater, For Reissues, see above				' Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 610.00						

SUBMITTED BY (Complete (if applicable) Registration No. (Attorney/Agent) (732) 542-9070 Name (Print/Type) Michael P. Straub 36,941 Telephone November 16, 2006 Signature

WARNING: Information on this form may become public. Credit card information should not

be included on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Pepartment of Commence Washington DC 20231 Trademark Office, U.S. Department of Commerce, Washington, DC 20231.

If you need essistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

# RECEIVED CENTRAL FAX CENTER

NOV 1 6 2006

STRAUB & POKOTYLO 620 Tinton Avenue Bldg. B, 2<sup>nd</sup> Floor Tinton Falls, NJ 07724-3260

#### CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper (and any accompanying paper(s)) is being facsimile transmitted to the United States Patent Office on the date shown below.

Michael P. Straub

Type or print name of person signing certification

Signature

November 16, 2006

Date

## NOV 1 6 2006

#### CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper (and any accompanying paper(s)) is being facsimile transmitted to the United States Patent Office on the date shown below.

Michael P. Straub

Type or print name of person signing certification

Muchael & Straul November 16, 2006

nature Date